PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number.

10789543

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS 19			(Column 1)		(Column 2)			TYPE		OR	·		
								RATE	FEE	╡.	RATE	FEE	
FC	OR ———————		NUMBER FILED		NUMBER EXTRA			BASIC FEI	385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	19 minus 20=		* Of			X\$ 9=		OR	X\$18=	/	
ሥ	DEPENDENT C		3 = minus 3 =					X43=		OR	X86=	, / ;	
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	1-	
* If the difference in column 1 is less than zero					"0" in d	column 2		TOTAL		OR	TOTAL	+70	
CLAIMS AS AMENDED - PART II									-		OTHER	THAN	
_		(Column 1)	(Column 2			(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus .	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***	0: 4:44	-		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
								TOTAL		'	. TOTAL		
		(Column 1)		Α	DDIT. FEE		1 0,	ADDIT. FEE					
8	<u></u>	CLAIMS		(Colum	ST	(Column 3)	Г		ADDI-	1 1	ı	ADDI-	
MENDMENT		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .		X43=	<u></u>	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
•								+145=		OR	+290=	•	
								TOTAL DDIT. FEE	·	OR ,	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)												·	
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID F	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Independent		Minus	***		=	-	X43=			X86=		
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	700-		
	Aba anto to		+145=		OR	+290=							
** If	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE		
1	Tine "Highest Nur The "Highest Num	mber Previously Paid ber Previously Paid	of For" IN THIS For" (Total or	S SPACE is I Independen	less than t) is the l	3, enter "3." highest number		DIT. FEE	opriate box				